



**Conference of State Bank Supervisors
State Banking Summit and Leadership Conference
Wyndham Washington, DC
November 5-6, 2003**

Registration Form

Registration Fee: \$350

Please print or type:

Name: _____ Badge Name: _____

Title: _____

Affiliation: _____

Address: _____

City/State/Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Are you planning to attend the reception on Wednesday, November 5th? ☐ Yes ☐ No

PAYMENT INFORMATION: *Please select preferred payment method.*

___ Check (*payable to CSBS*) ___ Bill me

___ Charge my credit card: ___ Visa ___ MC ___ AMEX

Card # _____ Expiration Date: _____

Name on credit card: _____ Signature: _____

Make your hotel reservation today by contacting the Wyndham Hotel directly at (800) 996-3426. Be sure to mention the Conference of State Bank Supervisors State Bank Summit. **The hotel cutoff date is Wednesday, October 15th.**

Enclose your check or credit card information with this form and send it to: Conference of State Bank Supervisors, Attention: Tonita Harrington, 1155 Connecticut Avenue, NW, 5th Floor, Washington, DC 20036-4306. Credit card registrations may be faxed to (202) 296-1928.